Clinical Indications:

1. Patient requiring intubation who has a mature stoma and does not have a replacement tracheostomy tube available.

Procedure:

1. Select the largest endotracheal tube (ETT) that will fit through the stoma without force; check the cuff and remove the stylette.
2. Pre-oxygenate the patient with 100% oxygen using a BVM.
3. Lubricate the ETT.
4. Suction if necessary.
5. Pass the ETT and inflate the cuff. The pharynx has been bypassed, so the ETT will protrude from the neck by several inches.
6. Hold the tube in place and attach the BVM.
7. While ventilating the patient, watch for equal rise and fall of the chest.
8. Secure the tube and ventilate with 100% oxygen.
10. Do not take longer than 30 seconds to perform this procedure.
11. Document ETT size, time, result (success) and placement location by the centimeter marks either at the stomal opening in the EHR. Document all devices used to confirm initial tube placement. Also document positive or negative breath sounds before and after each movement of the patient.
12. It is required that the airway be monitored continuously through waveform capnography (ALS providers) and pulse oximetry.